PART B - FEE(S) TRANSMITTAL Complete and send/this form, together applicable fee(s), to: Mail

Mail Stop IS C FEE 500.38907X00

Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 (571) 273-2885

INSTRUCTIONS: This form for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

or Fax

appropriate. All fui indicated unless co maintenance fee no	rrected below or	directed otherwise in Block I, by (a) specifying	notification of maintenance fees will be mailed to the current correspondence address as ng a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
CURRENT CORRES	PONDENCE ADDRE	SS (Note: Use Block 1 for any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying
24956	7590	10/19/2005	papers. Each additional paper, such as an assignment or formal drawing, mus

JAN 1 9 2006

24956 7 MATTINGLY, S 1800 DIAGONAL SUITE 370 ALEXANDRIA, N	CE ADDRESS (Note: Use Block 1 for any 1590 10/19/2005 STANGER, MALUR & ROAD VA 22314	• ,	Fee(s) Transmittal. T papers. Each addition have its own certifica	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
01/20/2006 MBEYENES 0	0000025 09642013					(Depositor's name)	
01 FC:1501	1400.00 DP					(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INV		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/642,013 08/21/2000		Koji Tanaka		naka	500.38907X00	8810	
APPLN. TYPE	SMALL ENTITY	ENTITY ISSUE I		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional NO		\$1400		\$0	\$1400	01/19/2006	
EXAM	ART UNIT		CLASS-SUBCLASS]			
HSU,	ALPUS	2665 370-235000		_			
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicates.	de address or indication of "Fee dence address (or Change of Co 22) attached. tion (or "Fee Address" Indication or more recent) attached. Use o	rrespondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO BE	PRINTED ON T	HE PATENT	(print or type)		 	
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified belon 37 CFR 3.11. Completion of	w, no assignee of this form is NOT	data will appea a substitute fo	or on the patent. If an assign filing an assignment.	nee is identified below, the d	ocument has been filed for	
(A) NAME OF ASSIGN		(B	B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Hitachi, Ltd	l.		Tokyo	, Japan		,	
Please check the appropriate	e assignee category or categorie	s (will not be pri	nted on the pat	ent): 🔲 Individual 🖾 🕏	Corporation or other private gro	oup entity Government	
4a. The following fee(s) are	4b	4b. Payment of Fec(s):					
Issue Fee			A check in the amount of the fee(s) is enclosed.				
Publication Fee (No s	small entity discount permitted)		Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50+1417 (enclose an extra copy of this form).				
Advance Order - # 0	f Copies		The Direct Deposit Accou	for is hereby authorized by our Number <u>50+141</u> 7	charge the required fee(s), or (enclose an extra co	credit any overpayment, to opy of this form).	
6. Change in Entity Status	(from status indicated above)				···		

(B) RESIDENCE: (Tokyo, Hitachi, Ltd. Please check the appropriate assignee category or categories (will not be printed on the paten 4a. The following fee(s) are enclosed: 4b. Payment of Fee XX Issue Fee A check in the Publication Fee (No small entity discount permitted) Payment by o ☐ Advance Order - # of Copies The Director Deposit Account 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature January 119, 2006 Date Carl I. Brundidge Typed or printed name 29,621 Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.